STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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PLEASE PRINT

NEW HAMPSHIRE

				DEFARTIMENT OF STATE
I. Name of Lobby	ist(s) Christ	opher Hods	zelon	
	ist's partnership, firr	•	•	
Comia	St UBCUr Name of partnership, firm	m or corporation)		
SY Rejor Business Address:	nel Drive (Street)	Concerd (Town/City)	<i>V. [-</i>] (State)	(Zip Code)
(603) 224-18 (Telephon	571 ext 201 (hris-Hodgdon @ come
	of covers: (Choose on the transactions which			Com you may file a separate report for
All reportable t	transactions occurring	in the months prior	to the reporting date relati	ve to the following client:
	Convest NO	Rouniversal	Lobbyist Registration Form)	
OR	(Full Name of Clie	ent as it appears on the	Lobbyist Registration Form)	
		byist (including the l	obbyist's family), or the le	obbying firm listed below which are
IV. Date of Repor	t April 26, 2017 activity from date of regis		July 26, 2017 activity from 4/1/17 to	
	October 25, 201 activity from 7/1/17		January 31, 20 activity from 10/1/17	
	ed, complete just this f		ole transactions made the Secretary of State's C	since the last report. Office, State House, Room 204,
	tional reports are atta		it file Addendum A - Fee:	s and Evnenses
	id an honorarium or re			B— Report of Honorariums or
		made political conti	ributions, you must file A	Idendum C- Political Contribution
I have read RSA 1:	/ Affirmation by Lobb 5, RSA 15-B, RSA 14 e best of my knowledg	-C and RSA 664 and	l hereby swear or affirm th	nat the foregoing information is true
Palt			——————————————————————————————————————	(Date)
Chris Holding (Print Name of Iol	odylon bbysti		,	(Date)

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Christopher Holylon	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Concest MC Universe (Name of partnership, firm or corporation)	
III. Name of Client Comcest MBC Universel	Date //// 2017
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, or public relations servi
a) Total of all fees received in this reporting period	a)\$ 23,000
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	a) \$ <u>23,000</u> b) \$ <u>46,000</u> ear)
c) Total of all fees received to date (Add lines a and b)	c)\$ <u>69,000</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$

V. Expenses:

Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobby fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/fir Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses p during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a busin lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the pers being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); a (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$25 restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or politic contributions will be reported on separate addendums and should not be reported on Addendum A.

	milage reimboranet from employed
d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 283-
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report	e) \$ <u>1166 </u>
f) Total of all expenses year to date	ns 1449
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	n lobbying fees during this reporting
Paid to:	Amount:
	. \$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affinistrue and complete to the best of my knowledge and belief.	firm that the foregoing information
(Signifyra of Johkrist)	11 Tott
(Signature of lobbyist)	(Date)
(Print Name of lobbyist)	

STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s) _(Christopher H	odgalon					
II. Name of lobbyist's partnership, firm or corporation, if any:							
•	Comeast UBC Universal (Name of partnership, firm or corporation)						
III. Name of Client Comest NBC Universe Date 1/1/2017							
Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:							
Full name of candidate:	Morse (Last Name)	Chuck (First Name)	(Middle Name/Initial)				
Amount of contribution \$ _	1000 00	Office Candidate is	s Seeking State Sande				
Full name of candidate:	Soucy (Mat Name)	Donn G (First Name)	(Middle Name/Initial)				
Amount of contribution \$ _	·		Seeking State Senate				
If the contribution is an in-	kind contribution, provide ontribution on the line abo	a description of the good	ds or services provided, and enter the actual cost is not known,				
Full name of candidate:	Sununu	Chas					
Amount of contribution \$_		(First Name)	(Middle Name/Initial) Seeking				

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
Facilities Rental, Admission, Food and Beverye to event

(If more than three contributions were made, report additional contributions on separate addendum C forms.)

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

(Print Name of lobbist)